

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

Born Fighting PAC

ADDRESS (number and street)

607 14th Street, NW Suite 800

☐Check if different
than previously
reported. (ACC)

Washington

DC

20005

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00430819

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☒July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

06

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Paul Fraim

Signature of Treasurer

Electronically Filed by Paul Fraim

Date

07

31

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 27

Write or Type Committee Name
Born Fighting PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	75765.26
(b) Cash on Hand at Beginning of Reporting Period	75763.26	
(c) Total Receipts (from Line 19)	66860.00	66860.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	142623.26	142625.26
7. Total Disbursements (from Line 31)	71840.90	71840.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70782.36	70784.36
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Born Fighting PAC

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	6

D	D
0	3

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	23600.00	23600.00
(ii) Unitemized	260.00	260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23860.00	23860.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	43000.00	43000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	66860.00	66860.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	66860.00	66860.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	66860.00	66860.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	66687.96	66687.96	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	66687.96	66687.96	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2652.94	2652.94	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	-1000.00	-1000.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	-1000.00	-1000.00	
29. Other Disbursements.....	3500.00	3500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	71840.90	71840.90	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71840.90	71840.90	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	66860.00	66860.00
34. Total Contribution Refunds (from Line 28(d))	-1000.00	-1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	67860.00	67860.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	66687.96	66687.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	66687.96	66687.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 27

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

Susan McIntosh

Mailing Address 350 Sharon Park Drive C-24

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Firedoglake

Occupation
Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 1 / 2 0 0 9

Transaction ID: C2839600

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Drina A Northam

Mailing Address 111 Gallop Place

City

Newport News

State

VA

Zip Code

23608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverside Medical Center

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: C2765122

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

San Manuel Band Of Mission Indians

Mailing Address 26569 Community Center Drive

City

Highland

State

CA

Zip Code

92346

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 6 / 2 0 0 9

Transaction ID: C2760882

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

12000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

Leonard A. Bennett

Mailing Address 111 Gallop Place

City

Newport News

State

VA

Zip Code

23608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: C2765126

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Leon E. Roday

Mailing Address 9624 Sloman Place

City

Richmond

State

VA

Zip Code

23233

FEC ID number of contributing
federal political committee.

C

Name of Employer
Genworth Financial

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: C2839598

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Nelson M Jones, III

Mailing Address 2016 Main, #1701
Suite 475

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 9

Transaction ID: C2789110A

Amount of Each Receipt this Period

2600.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

9600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 9

Transaction ID: C2789110AB

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Anthony Spadaro

Mailing Address 4634 North 38th Street

City

Arlington

State

VA

Zip Code

22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Spadaro and Associates

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: C2786123A

Amount of Each Receipt this Period

2000.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 8 / 2 0 0 9

Transaction ID: C2786123AB

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

23600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

Areva, Cogema, Framatome ANP Political Action Comm

Mailing Address 4800 Hampden Lane

City

Bethesda

State

MD

Zip Code

20814

FEC ID number of contributing
federal political committee.

C

C00395285

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: C2793980

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Day & Zimmermann, Inc. Political Action Committee

Mailing Address 1500 Spring Garden Street

City

Philadelphia

State

PA

Zip Code

19130

FEC ID number of contributing
federal political committee.

C

C00341271

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 9

Transaction ID: C2790521

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

United Airlines, Inc. Political Action Committee

Mailing Address PO Box 66100

City

Chicago

State

IL

Zip Code

60666

FEC ID number of contributing
federal political committee.

C

C00078261

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 2 / 2 0 0 9

Transaction ID: C2756982

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

American Association For Justice PAC

Mailing Address 777 6th Street, NW
Suite 200

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00024521

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: C2793773

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Dominion PAC

Mailing Address One James River Plaza 20th Floor
P.O. Box 26666

City State Zip Code
Richmond VA 23261

FEC ID number of contributing
federal political committee.

C C00108209

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: C2780114

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Honeywell International Political Action Committee

Mailing Address 101 Constitution Avenue, NW
Suite 500 West

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 9

Transaction ID: C2816866

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
Marijuana Policy Project Medical Marijuana PAC

Mailing Address P.O. Box 77492

City State Zip Code
Washington DC 20013

FEC ID number of contributing
federal political committee. **C** C00389882

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 4 / 2 0 0 9

Transaction ID: C2763506

Amount of Each Receipt this Period

1500.00

B.

Full Name (Last, First, Middle Initial)
Altria Group, Inc. PAC

Mailing Address 101 Constitution Ave NW
Suite 400W

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: C2793776

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
Babcock & Wilcox Companies Political Action Comm.

Mailing Address 2016 Mount Athos Road

City State Zip Code
Lynchburg VA 24504

FEC ID number of contributing
federal political committee. **C** C00365502

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 9

Transaction ID: C2793956

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
Norfolk Southern Corporation Good Government Fund

Mailing Address Three Commercial Place

City State Zip Code
Norfolk VA 23510

FEC ID number of contributing
federal political committee.

C C00009282

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: C2816867

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
United Pilots PAC/Airline Pilots Association

Mailing Address 9550 West Higgins Road
Suite 1000

City State Zip Code
Rosemont IL 60018

FEC ID number of contributing
federal political committee.

C C00251009

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 7 / 2 0 0 9

Transaction ID: C2779967

Amount of Each Receipt this Period

3000.00

C.

Full Name (Last, First, Middle Initial)
American Podiatric Medical Association PAC

Mailing Address 9312 Old Georgetown Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: C2793988

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

13000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

Dealers Election Action Committee

Mailing Address 8400 Westpark Drive

City

Mc Lean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C

C00040998

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 5 / 2 0 0 9

Transaction ID: C2780119

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Nat'l Assoc. Of Real Estate Investment Trusts PAC

Mailing Address 1875 I Street, NW
Suite 600

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

C00303339

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 9

Transaction ID: C2794009

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

43000.00

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)
Born Fighting PAC

02 / 24 / 2009

State: District:

03 / 30 / 2009

State: District:

03 / 02 / 2009

State: District:

FEC Schedule B (Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) AWF Consulting, Inc.	Transaction ID: D193971 Date of Disbursement																				
Mailing Address 426 C Street, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	7		2	0	0	9												
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement Fundraising Consulting Services	<table border="1"> <tr> <td colspan="10">6535.68</td> </tr> </table>	6535.68																			
6535.68																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D194831 Date of Disbursement																				
Mailing Address 607 Fourteenth Street N.W. Suite 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	0	9												
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																				
Purpose of Disbursement Legal & Accounting Services	<table border="1"> <tr> <td colspan="10">1523.70</td> </tr> </table>	1523.70																			
1523.70																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D195581 Date of Disbursement																				
Mailing Address P.O. Box 1270	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
City Newark State NJ Zip Code 07101	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee	<table border="1"> <tr> <td colspan="10">3.25</td> </tr> </table>	3.25																			
3.25																					
Candidate Name	Category/Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8062.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial)
Washington Nationals Baseball Club

Mailing Address 1500 South Capitol Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Tickets for Event

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D190731

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7180.00

B. Full Name (Last, First, Middle Initial)
NGP Software

Mailing Address 1225 I Street, NW, Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D193972

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D195582

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4.95

SUBTOTAL of Disbursements This Page (optional)

7484.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) AWF Consulting, Inc.	Transaction ID: D190892 Date of Disbursement																				
Mailing Address 426 C Street, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	0	9												
City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">6523.79</td> </tr> </table>	6523.79																			
6523.79																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D195583 Date of Disbursement																				
Mailing Address P.O. Box 1270	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	6		2	0	0	9												
City Newark State NJ Zip Code 07101 Purpose of Disbursement Credit Card Processing Fee Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">325.00</td> </tr> </table>	325.00																			
325.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D187864 Date of Disbursement																				
Mailing Address 607 Fourteenth Street N.W. Suite 800	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	0	9												
City Washington State DC Zip Code 20005 Purpose of Disbursement Legal & Accounting Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1506.89</td> </tr> </table>	1506.89																			
1506.89																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8355.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
Blackrock Associates, LLC

Mailing Address 1936 University Avenue, Suite 191

City Berkeley State CA Zip Code 94704

Purpose of Disbursement
Internet Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D187865

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Blackrock Associates, LLC

Mailing Address 1936 University Avenue, Suite 191

City Berkeley State CA Zip Code 94704

Purpose of Disbursement
Software License

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D195415

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
AWF Consulting, Inc.

Mailing Address 426 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D189716

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) AWF Consulting, Inc.	Transaction ID: D194797 Date of Disbursement																				
Mailing Address 426 C Street, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	0	9												
City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4000.00</td> </tr> </table>	4000.00																			
4000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) AWF Consulting, Inc.	Transaction ID: D195577 Date of Disbursement																				
Mailing Address 426 C Street, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	6		2	0	0	9												
City Washington State DC Zip Code 20002 Purpose of Disbursement Fundraising Consulting Services Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>6542.00</td> </tr> </table>	6542.00																			
6542.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Blackrock Associates, LLC	Transaction ID: D194798 Date of Disbursement																				
Mailing Address 1936 University Avenue, Suite 191	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	0	9												
City Berkeley State CA Zip Code 94704 Purpose of Disbursement Software License Candidate Name	Amount of Each Disbursement this Period <table border="1"> <tr> <td>1100.00</td> </tr> </table>	1100.00																			
1100.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

11642.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 27

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
NGP Software

Mailing Address 1225 I Street, NW, Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Database Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D195578

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Perkins Coie LLP

Mailing Address 607 Fourteenth Street N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D195638

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1501.96

C.

Full Name (Last, First, Middle Initial)
Perkins Coie LLP

Mailing Address 607 Fourteenth Street N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D193969

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3016.71

SUBTOTAL of Disbursements This Page (optional)

4818.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 27

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) Perkins Coie LLP	Transaction ID: D189719 Date of Disbursement
Mailing Address 607 Fourteenth Street N.W. Suite 800	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
Purpose of Disbursement Legal & Accounting Services	<div> <div></div> <div>1518.73</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) AWF Consulting, Inc.	Transaction ID: D195639 Date of Disbursement
Mailing Address 426 C Street, NE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 3 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising Consulting Services	<div> <div></div> <div>3529.74</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: D190732 Date of Disbursement
Mailing Address P.O. Box 15153	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 4 / 2 0 0 9</div> </div>
City Wilmington State DE Zip Code 19886	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Payment, See Below	<div> <div></div> <div>850.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5898.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) Washington Nationals Baseball Club	Transaction ID: D190733 Date of Disbursement																				
Mailing Address 1500 South Capitol Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	0	9												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Facility Rental Candidate Name	<table border="1"> <tr> <td colspan="10">850.00</td> </tr> </table>	850.00																			
850.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: D194795 Date of Disbursement																				
Mailing Address P.O. Box 15153	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	0	9												
City Wilmington State DE Zip Code 19886	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment, See Below Candidate Name	<table border="1"> <tr> <td colspan="10">466.00</td> </tr> </table>	466.00																			
466.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) Washington Nationals Baseball Club	Transaction ID: D194796 Date of Disbursement																				
Mailing Address 1500 South Capitol Street, SE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	4		2	0	0	9												
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets for Event Candidate Name	<table border="1"> <tr> <td colspan="10">466.00</td> </tr> </table>	466.00																			
466.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

466.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 15153

City State Zip Code
Wilmington DE 19886

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D196751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2168.00

B.

Full Name (Last, First, Middle Initial)
Levy Restaurants

Mailing Address 980 N. Michigan Avenue

City State Zip Code
Chicago IL 60611

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D196752

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1989.52

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2168.00

TOTAL This Period (last page this line number only)

66051.35

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) Leahy for U.S. Senator Mailing Address PO Box 1042	Transaction ID: D196750 Date of Disbursement <div> <div>06</div> <div>24</div> <div>2009</div> </div>
City Montpelier State VT Zip Code 05601 Purpose of Disbursement Contribution Candidate Name Patrick Leahy Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VT District:	Amount of Each Disbursement this Period <div>2500.00</div>
B. Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address P.O. Box 15153 City Wilmington State DE Zip Code 19886 Purpose of Disbursement Credit Card Payment, See Below Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D193973 Date of Disbursement <div> <div>03</div> <div>21</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>152.94</div>
C. Full Name (Last, First, Middle Initial) Mile High Grille Mailing Address Denver International Airport City Denver State CO Zip Code 80249 Purpose of Disbursement In-Kind Travel to Montana Democratic Party Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D193974 Date of Disbursement <div> <div>03</div> <div>21</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>37.81</div> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

2652.94

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)

Wolfgang Puck Express

Mailing Address Denver International Airport

City State Zip Code
Denver CO 80249

Purpose of Disbursement
In-Kind Travel to Montana Democratic Party

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D193975

Date of Disbursement

M M / D D / Y Y Y Y
03 / 21 / 2009

Amount of Each Disbursement this Period

30.13

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Reston Limosuine

Mailing Address 45685 Elmwood Court

City State Zip Code
Sterling VA 20166

Purpose of Disbursement
In-Kind Travel to Montana Democratic Party

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D193976

Date of Disbursement

M M / D D / Y Y Y Y
03 / 21 / 2009

Amount of Each Disbursement this Period

85.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

2652.94

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A.

Full Name (Last, First, Middle Initial)
Norman Hsu

Mailing Address 160 Wooster Street
Apartment 3C

City State Zip Code
New York NY 10012

Purpose of Disbursement
Void of 9/07 check. See Line 29

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D202798

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-1000.00

SUBTOTAL of Disbursements This Page (optional)

-1000.00

TOTAL This Period (last page this line number only)

-1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Born Fighting PAC

A. Full Name (Last, First, Middle Initial) Sharon Bulova For Chairman Mailing Address PO Box 19	Transaction ID: D187834 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9										
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1		1	2		2	0	0	9																						
City State Zip Code Fairfax Station VA 22039-0019 Purpose of Disbursement Nonfederal Contribution Candidate Name Sharon Bulova For Chairman Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																													
2000.00																															
B. Full Name (Last, First, Middle Initial) UMWA International Relief Fund Mailing Address 8315 Lee Highway City State Zip Code Fairfax VA 22031 Purpose of Disbursement Donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	Transaction ID: D190694 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	0		2	0	0	9	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	2		2	0		2	0	0	9																						
1000.00																															
C. Full Name (Last, First, Middle Initial) Friends Of Charniele Herring Mailing Address 715 North Ashton Street City State Zip Code Alexandria VA 22312 Purpose of Disbursement Nonfederal Contribution Candidate Name Friends Of Charniele Herring Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ State: District:	Transaction ID: D187835 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																						
0	1		1	2		2	0	0	9																						
500.00																															

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

3500.00